S\$B0009-US

COMPLETE IF KNOWN

William Ortner, et al.

claimed.

DECLARATION FOR UTILITY OR

DESIGN PATENT APPLICATION

PTO/SE/01 (05-03)
Approved for use through 04/30/2003, 0MB 0851-0032
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Attorney Docket Number

First Named Inventor

(37 CFR 1.63)		Application Number	Not yet assigned/				
☑Declaration Submitted 0	Declaration Submitted after Initial	Filing Date	Herewith				
With Initial	Filing (surcharge (37 CFR 1.16 (e))	Art Unit	Not yet assigned				
Filing	required)	Examiner Name	Not yet assigned				
I hereby declare	that:						
Each inventor's re	sidence, mailing address, and clu	zenship are as stated be	low next to their name.				
I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
METHOD AND SYSTEM FOR PROVIDING MANDATORILY CONVERTIBLE SECURITIES WITH AN ASSOCIATED CALL SPREAD AGAINST A TRUST							
the specification of	which (Title of the	Invention)					
is attached he	,	,					
OR							
☐ was file⊄ on (i	MM/DD/YYY)	as United States Ap	pplication Number or PCT International				
Application Number and was amended on (MM/DD/YYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.58, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
breeder's rights certific States of America, liste	ate(s), or 365(a) of any PCT international delays and have also identified below	onal application which design, by checking the box any f	oreign application(s) for patent, inventor's or plant inated at least one country other than the United oreign application(s) for patent, inventor's or plant before that of the application on which priority is				

Certified Copy Attached? Prior Foreign Application Foreign Filing Date Priority Number(s) Country (MM/DD/YYYY) Country **Not Claimed** YES

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

This collection of information is required by 37 CFR 115 and 37 CFR 1.33. The Information Is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the Individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

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Name							
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City	State			ZIP			
Country		Telephor	ne		Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:	A petiti	on has b	een filed	d for this	unsigned inventor		
Given Name William (first and middle [if any])		Family or Sun		Ortner			
Inventor's Signature Milliam	H13		D	ate 7/2	9/03		
Residence: City	State	_ c	Country		Citizenship		
New York	NY		USA		U.S.		
Malling Address							
500 East 77th Street, Apt. 1815							
City	State	2	Zip		Country		
New York	NY		10162		USA		
NAME OF SECOND INVENTOR: A P	etition has be	en filed	for this (unsigned	l inventor		
Given Name Alan (first and middle [if any])		Family or Surr		Rifkin			
Inventor's OMMIL			D	ate 7/29	7/03		
Residence: City	State	C	Country		Citizenship		
New York	NY		J\$A		U.S.		
Mailing Address		_					
19-21 Warren Street, Apt. 2w							
City	State	Z	Zip		Country		
New York	NY		10007		U.S.		
Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.							

PTO/SB/02A (05-03)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page <u>3</u> of <u>3</u>

Name of Additional Joint Inventor, If any:		☐ A petition has been filed for this unsigned inventor						
Given Name (first and midd	Name (first and middle [if any]) Family Name or Surname							
Craig		Farr						
inventor's Signature Cours Fe	er_	Date						
Residence: City New York	State	Country USA Citizenship Cana			Canadian Citizenship			
Mailing Address 20 Thistie Lane								
Mailing Address								
City Rye	_State NY	ZIP	10580	Co	USA			
Name of Additional Joint Inventor, if any:			A petition has been file	ed for	this unsigned inventor			
Given Name (first and midd	lle [if any])	1	Family Name or Surname					
Inventor's Signature					Date			
Residence: City	State	Country			Citizenship			
Mailing Address								
Mailing Address								
City	State	Zlp		Co	ountry			
Name of Additional Joint Inventor, if any:								
Given Name (first and midd	$oldsymbol{\perp}$	Family Name or Surname						
Inventor's Signature					Date			
Residence: City	State	State Country			Citizenship			
Mailing Address								
Mailing Address								
City	State	State Zip			Соильту			

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Herewith

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	Application Number	Not yet assigned

Filing Date **POWER OF ATTORNEY OR** William Ortner, et al. First Named Inventor **AUTHORIZATION OF AGENT** Not yet assigned **Art Unit** Not yet assigned **Examiner Name** SSB0009-US **Attorney Docket Number** I hereby appoint: Place Customer Practitioners at Customer Number 27510 Number Bar Code Label here ☐ Practitioner(s) named below: Name Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: ☐ The above-mentioned Customer Number. Place Customer OR Number Bar Code Practitioners at Customer Number Label here OR Firm or Individual Name Address Address City State ZIP Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name William Ortner Signature 7129/03 Telephone NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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Telephone				Fax	·· <u> </u>			
	ant/Invento	or. rd of the entire	interest Sea	37 CFR 3.71.				
Certific	ate under :	37 CFR 3.73(b)	is enclosed.	(Form PTO/SB/96).				
			SIGNATURE	of Applicant or As	signee of Reco	ord		
Name	Alan Rifk	in					· · · · · · · · · · · · · · · · · · ·	
Signature	Ost.	allin						
Date	7/2	9/03			Telephone			
Submit multi	ole forms i	II the inventors if more than or are submitted	ne signature	es of record of the e is required, see be	entire interest o low".	r their rep	presentative(s) are require	d.

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	Application Numbe	r N ty tassigned				
	Filing Date	Herewith	Herewith			
POWER OF ATTORNEY OR	First Named Invent	or William Ortner, et a	William Ortner, et al.			
AUTHORIZATION OF AGENT	Art Unit	Not yet assigned	Not yet assigned			
	Examiner Name	Not yet assigned				
	Attorney Docket Nu	imber SSB0009-US				
I hereby appoint:						
☑ Practitioners at Customer Number 275 OR	10	Place Customer Number Bar Code Lebel here				
☐ Practitioner(s) named below:			7			
Name		Registration Number	ation Number			
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I am the:						
Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71.						
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).						
SIGNATURE of Applicant or Assignee of Record						
Name Craig Farr						
Signature Muy Man						
Date July, 24 2003	<u></u>	elephone				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						

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